Fill in	this inform	ation to identify your	case:			
Debto	or 1	Robert C. Clark				
		First Name	Middle Name	Last Name		
Debto (Spouse	or 2 e if, filing)	First Name	Middle Name	Last Name		
` '		deruptor Court for the	WESTERN DISTRICT	OE NEW YORK		
United	u States bar	kruptcy Court for the:	WESTERN DISTRICT	OF NEW YORK		
		-18-20118				
(if know	n)				_	k if this is an
					amen	nded filing
Offic	cial For	m 106Sum				
Sum	nmary o	f Your Assets	and Liabilities a	nd Certain Statistical Information	n	12/15
				e are filing together, both are equally responsibl		
				the information on this form. If you are filing ame	ended schedu	ıles after you file
your o	nigiliai ioili	is, you must mi out a	new Summary and thet	ck the box at the top of this page.		
Part 1	Summa	arize Your Assets				
					Your a	ssets
					Value	of what you own
1. \$	Schedule A	B: Property (Official F	orm 106A/B)			450 000 00
1	1a. Copy line	55, Total real estate, f	rom Schedule A/B		\$	150,000.00
1	1b. Copy line	e 62, Total personal pro	perty, from Schedule A/B		\$	10,116.00
1	1c. Copy line	e 63, Total of all propert	y on Schedule A/B		\$	160,116.00
Part 2	Summa	arize Your Liabilities				
rait 2	Sullilla	arize rour Liabilities				
						iabilities
					Amour	nt you owe
			claims Secured by Propert	y (Official Form 106D) t the bottom of the last page of Part 1 of <i>Schedule D</i>	\$	141,189.39
2	га. Сору ше	total you listed in Colu	IIIII A, AIIIOUIII OI CIAIIII, ai	t the bottom of the last page of Fart 1 of Schedule D	····	,
			Unsecured Claims (Official	al Form 106E/F) ms) from line 6e of <i>Schedule E/F</i>	\$	1,994.00
	.,		,	,	···· -	,
3	3b. Copy the	e total claims from Part	2 (nonpriority unsecured	claims) from line 6j of Schedule E/F	\$	0.00
				Your total liabilit	ies \$	143,183.39
Part 3	Summa	arize Your Income and	l Expenses			
4 4	0-11-1-1		4001)			
		Your Income (Official Football		'e I	\$	3,462.00
- ,	0-11-1	V	I Farra 400 IV			
		Your Expenses (Officia onthly expenses from I			\$	1,593.00
Part 4	: Answe	r These Questions for	· Administrative and Sta	tistical Records		
	A	a fan hanlessertesser	lan Obantana 7 44 av 400	2		
_	-	•	er Chapters 7, 11, or 13?	? Check this box and submit this form to the court with	vour other ce	hadulas
ı	☐ No. You	тыме пошту то героп	, on this part of the form. (DIECK THE DOX AND SUDTHIL THE COURT WITH	your other SC	nedules.
ı	Yes					
7. \	What kind o	f debt do you have?				

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

page 1 of 2

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

2,838.00

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total clai	m
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	1,994.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	1,994.00

Fill in this inform	nation to identify yo	our case and th	nis filin	ng:							
Debtor 1	Robert C. Clar	k									
Debtor 2	First Name	Middle	e Name			Last Name					
(Spouse, if filing)	First Name	Middle	e Name			Last Name			-		
United States Ban	kruptcy Court for th	e: WESTERN	N DISTR	RICT	OF NEW Y	ORK			_		
Case number 2	-18-20118										Check if this is ar amended filing
Official For	rm 106A/B										
Schedule	A/B: Pro	perty									12/15
nformation. If more Answer every quest	e as complete and acc space is needed, att ion. Each Residence, Build	ach a separate sl	heet to t	this f	form. On the	top of any a	dditional page				
Do you own or ha No. Go to Part Yes. Where is		able interest in a	any resid	idenc	e, building, la	and, or simi	lar property?				
	2-4 Alvin Place Street address, if available, or other description] Sii ∎ Du	the property? ingle-family ho uplex or multi- ondominium o	ome unit building		the a	mount of any secu	red cla	s or exemptions. Put aims on <i>Schedule D:</i> Secured by <i>Property</i> .
Rochester	NY ·	14607-0000			anufactured o	r mobile hon	ne		ent value of the e property?	р	current value of the ortion you own?
City	State	ZIP Code		_] Tir	vestment prop meshare ther	perty				f your	\$150,000.00 ownership interest y by the entireties, or
			Who	Who has an interest in the property? Check one a life e				estate), if known.		,	
Monroe				_	ebtor 1 only ebtor 2 only				owner		
County			Othe	De De	ebtor 1 and Do	he debtors a	nd another d about this ite	ъ,	Check if this is c (see instructions) as local	ommu	nity property
							erty tax ass	essme	nt.		
	or value of the port										\$150,000.00

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Debtor 1 Robert C. Clark	C	ase number (if known) 2-1	8-20118
3. Cars, vans, trucks, tractors, sport utility	y vehicles, motorcycles		
□No			
■ Yes			
3.1 Make: Toyota	Who has an interest in the property? Check one		claims or exemptions. Put red claims on Schedule D:
Model: Sienna	■ Debtor 1 only		nims Secured by Property.
Year: 2008	Debtor 2 only	Current value of the	Current value of the
Approximate mileage: 6200		entire property?	portion you own?
Other information: Good condition	☐ At least one of the debtors and another		
Good Condition	Check if this is community property (see instructions)	\$8,000.00	\$8,000.00
		=>	\$8,000.00 Current value of the
6. Household goods and furnishings Examples: Major appliances, furniture, lin	ens, china, kitchenware		portion you own? Do not deduct secured claims or exemptions.
☐ No ■ Yes. Describe			
Tes. Describe			
Couch, desk	, bed, chairs, kitchen table, end tables		\$300.00
Refrigerator	, stove, microwave, washer/dryer, iron		\$300.00
 7. Electronics Examples: Televisions and radios; audio, including cell phones, camera □ No ■ Yes. Describe 	video, stereo, and digital equipment; computers, printes, media players, games	ers, scanners; music collect	ions; electronic devices
TV, cell phor	20		\$150.00
1 V, Cell pilol	10		Ψ100.00
 B. Collectibles of value Examples: Antiques and figurines; paintin other collections, memorabilia In No 	ngs, prints, or other artwork; books, pictures, or other ar ,, collectibles	t objects; stamp, coin, or ba	aseball card collections;
Yes. Describe			
 Equipment for sports and hobbies Examples: Sports, photographic, exercise musical instruments No 	e, and other hobby equipment; bicycles, pool tables, gol	If clubs, skis; canoes and k	ayaks; carpentry tools;
Yes. Describe			

Debtor 1	Robert C. Clark	Case number (if I	(nown) 2-18	3-20118
	Specialized Expedition b	icycle		\$100.00
■ No	oles: Pistols, rifles, shotguns, ammunition, and rel	ated equipment		
⊔ Yes.	Describe			
11. Clothe <i>Exam</i> µ □ No	s ples: Everyday clothes, furs, leather coats, design	er wear, shoes, accessories		
Yes.	Describe			
	Clothing, shoes & access	sories		\$100.00
■ No		nent rings, wedding rings, heirloom jewelry, watches, g	ems, gold, si	lver
Exam _l ■ No	rm animals bles: Dogs, cats, birds, horses Describe			
14. Any ot ☐ No	her personal and household items you did no	t already list, including any health aids you did not	list	
Yes.	Give specific information			
	Hammers, screwdrivers,	hand tools, circular saw, electric drill		\$200.00
	the dollar value of all of your entries from Part art 3. Write that number here	3, including any entries for pages you have attach	ed	\$1,150.00
	scribe Your Financial Assets			
Do you ov	vn or have any legal or equitable interest in an	y of the following?	[Current value of the cortion you own? On not deduct secured claims or exemptions.
☐ No	oles: Money you have in your wallet, in your home	e, in a safe deposit box, and on hand when you file you	r petition	
		Cash on ha	ınd	\$65.00
	its of money oles: Checking, savings, or other financial accoun institutions. If you have multiple accounts wi	ts; certificates of deposit; shares in credit unions, broke th the same institution, list each.	erage houses	and other similar
		Institution name:		
	17.1. Account No. 3038	Comerica Bank		\$901.00

Debtor 1	Robert C. Clark	Case number (if known)	2-18-20118
18. Bonds Exam	s, mutual funds, or publicly traded stocks ples: Bond funds, investment accounts with brokers	age firms, money market accounts	
■ No □ Yes	Institution or issuer nam	e:	
		ed and unincorporated businesses, including an interest i	n an IIC nartnershin and
	venture	and annicorporated businesses, including an interest i	ir air EEO, partifersiiip, aira
	Give specific information about them		
	Name of entity:	% of ownership:	
Nego Non-i	nment and corporate bonds and other negotiab tiable instruments include personal checks, cashier negotiable instruments are those you cannot transfe	s' checks, promissory notes, and money orders.	
■ No	City and aid a information about them		
⊔ Yes	Give specific information about them Issuer name:		
M Datina			
	ment or pension accounts ples: Interests in IRA, ERISA, Keogh, 401(k), 403(k)	o), thrift savings accounts, or other pension or profit-sharing pla	ans
	List each account separately.		
	Type of account:	Institution name:	
Your Exam		t you may continue service or use from a company ic utilities (electric, gas, water), telecommunications companie	s, or others
■ No □ Yes		Institution name or individual:	
23. Annui ■ No	ties (A contract for a periodic payment of money to	you, either for life or for a number of years)	
_	Issuer name and description.		
26 U.S	ts in an education IRA, in an account in a qualif .C. §§ 530(b)(1), 529A(b), and 529(b)(1).	fied ABLE program, or under a qualified state tuition progr	ram.
■ No □ Yes	Institution name and description. Se	eparately file the records of any interests.11 U.S.C. § 521(c):	
	s, equitable or future interests in property (other	than anything listed in line 1), and rights or powers exerc	isable for your benefit
■ No □ Yes	Give specific information about them		
6. Paten	s, copyrights, trademarks, trade secrets, and o	ther intellectual property	
	ples: Internet domain names, websites, proceeds for		
	Give specific information about them		
Exam	ses, franchises, and other general intangibles ples: Building permits, exclusive licenses, cooperat	tive association holdings, liquor licenses, professional licenses	
■ No □ Yes	Give specific information about them		
Money or	property owed to you?		Current value of the
money or	property owed to you?		portion you own? Do not deduct secured claims or exemptions.
28. Tax re	funds owed to you		
■ No			
☐ Yes	Give specific information about them, including wh	nether you already filed the returns and the tax years	

Del	otor 1	Robert C. Clark	Case number (if known)	2-18-20118
29.		support les: Past due or lump sum alimony, spousal support, child support, m	naintenance, divorce settlement, property	settlement
-	No			
_		Give specific information		
_	Examp _	mounts someone owes you les: Unpaid wages, disability insurance payments, disability benefits, benefits; unpaid loans you made to someone else	sick pay, vacation pay, workers' comper	nsation, Social Security
_	■ No □ Yes.	Give specific information		
	Examp	ts in insurance policies bles: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurar	nce
_	No			
[⊒ Yes. I	Name the insurance company of each policy and list its value. Company name:	Beneficiary:	Surrender or refund value:
ı	If you a someon	erest in property that is due you from someone who has died are the beneficiary of a living trust, expect proceeds from a life insurance has died. Give specific information	nce policy, or are currently entitled to rece	eive property because
33.		against third parties, whether or not you have filed a lawsuit or bles: Accidents, employment disputes, insurance claims, or rights to s		
ı	■ No			
		Describe each claim		
_	Other c ■ No	contingent and unliquidated claims of every nature, including co	unterclaims of the debtor and rights to	set off claims
_	_	Describe each claim		
_	Any fin	ancial assets you did not already list		
_	_	Observation of the before and the		
ı	→ Yes.	Give specific information		
36.		he dollar value of all of your entries from Part 4, including any entry 4. Write that number here		\$966.00
Par	t 5: Des	scribe Any Business-Related Property You Own or Have an Interest In. Li	st any real estate in Part 1.	
37	Do vou o	own or have any legal or equitable interest in any business-related proper	rtv?	
_		to Part 6.		
	Yes. G	so to line 38.		
Par		scribe Any Farm- and Commercial Fishing-Related Property You Own or I ou own or have an interest in farmland, list it in Part 1.	Have an Interest in.	
16.		own or have any legal or equitable interest in any farm- or com	mercial fishing-related property?	
	_	Go to Part 7.		
	☐ Yes.	Go to line 47.		
Par	t 7:	Describe All Property You Own or Have an Interest in That You Did Not	List Above	
	Examp	have other property of any kind you did not already list? eles: Season tickets, country club membership		
	No			
[☐ Yes. (Give specific information		

Deb	tor 1	Robert C. Clark	2-18-20118					
54. Add the dollar value of all of your entries from Part 7. Write that number here								
Part	8:	List the Totals of Each Part of this Form						
55.	Part 1	: Total real estate, line 2			\$150,000.00			
56.	Part 2	2: Total vehicles, line 5	\$8,000.00					
57.	Part 3	3: Total personal and household items, line 15	\$1,150.00					
58.	Part 4	4: Total financial assets, line 36	\$966.00					
59.	Part 5	5: Total business-related property, line 45	\$0.00					
60.	Part 6	6: Total farm- and fishing-related property, line 52	\$0.00					
61.	Part 7	7: Total other property not listed, line 54 +	\$0.00					
62.	Total	personal property. Add lines 56 through 61	\$10,116.00	Copy personal property to	stal \$10,116.00			
63.	Total	of all property on Schedule A/B. Add line 55 + line 62			\$160,116.00			

Fill in this infor				
Debtor 1	Robert C. Clark			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		WESTERN DISTRICT (DF NEW YORK	
Case number	2-18-20118			
(if known)	2 10 20110			Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property	You Claim as Exempt
-------------------------------	---------------------

Pa	rt 1: Identify the Property You Claim as E	xempt					
1.	Which set of exemptions are you claiming? Check one only, even if your spouse is filling with you.						
	■ You are claiming state and federal nonban	kruptcy exemptions. 1	11 U.S	S.C. § 522(b)(3)			
	☐ You are claiming federal exemptions. 11 t	J.S.C. § 522(b)(2)					
2.	For any property you list on Schedule A/B	that you claim as exe	mpt,	fill in the information below.			
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption		
		Copy the value from Schedule A/B	Che	ck only one box for each exemption.			
	2-4 Alvin Place Rochester, NY 14607 Monroe County	\$150,000.00		\$82,775.00	NYCPLR § 5206		
	Value based on real property tax assessment. Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit			
	2008 Toyota Sienna 62000 miles Good condition	\$8,000.00		\$8,000.00	NYCPLR § 5205(a)(8)		
	Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit			
	Couch, desk, bed, chairs, kitchen table, end tables	\$300.00		\$300.00	NYCPLR § 5205(a)(5)		
	Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit			
	Refrigerator, stove, microwave,	\$300.00	_	\$300.00	NYCPLR § 5205(a)(5)		

washer/dryer, iron Line from Schedule A/B: 6.2

TV, cell phone

Line from Schedule A/B: 7.1

\$150.00

NYCPLR § 5205(a)(5)

100% of fair market value, up to any applicable statutory limit

100% of fair market value, up to any applicable statutory limit

\$150.00

Debtor	1 Robert C. Clark		Case number (if known)	2-18-20118		
	ef description of the property and line on hedule A/B that lists this property	Current value of the portion you own			Specific laws that allow exemption	
	othing, shoes & accessories	\$100.00		\$100.00	NYCPLR § 5205(a)(5)	
LII	le II on Suredule A/B. 11.1	· · · · · · · · · · · · · · · · · · ·		100% of fair market value, up to any applicable statutory limit		
 3. Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.) No Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case? 						

Fill in this information to identify you	ur easo:			
Fill in this information to identify you	ii case.			
Debtor 1 Robert C. Clark			_	
First Name	Middle Name Last Nam	e		
Debtor 2 (Spouse if, filing) First Name	Middle Name Last Nam	e	-	
United States Bankruptcy Court for the:	WESTERN DISTRICT OF NEW YORK		-	
Case number 2-18-20118				
(if known)			☐ Check	if this is an
			amend	led filing
Official Form 106D				
Schedule D: Creditors	Who Have Claims Secu	red by Propert	:V	12/15
	If two married people are filing together, both a out, number the entries, and attach it to this for			
1. Do any creditors have claims secured by	your property?			
☐ No. Check this box and submit the	nis form to the court with your other schedule	s. You have nothing else	to report on this form.	
Yes. Fill in all of the information	•	0 1 1 1	•	
	below.			
Part 1: List All Secured Claims		. Column A	Column B	Column C
	nore than one secured claim, list the creditor sepal a particular claim, list the other creditors in Part 2. cal order according to the creditor's name.	ately	Value of collateral that supports this claim	Unsecured portion
2.1 CITY OF ROCHESTER	Describe the property that secures the claim:	\$21,400.00	\$150,000.00	\$0.00
Creditor's Name	RE - 2-4 Alvin Place			
Bureau of Treasury 30 Church Street, Room 100A	As of the date you file, the claim is: Check all th	at .		
Rochester, NY	apply.	••		
14614-1294	☐ Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated			
	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	☐ An agreement you made (such as mortgage of	or secured		
☐ Debtor 2 only	car loan)			
☐ Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, mechanic's lie	n)		
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset)			
2014/15 -		7.4		
Date debt was incurred 2017/18	Last 4 digits of account number 31	74		
2.2 INTERNAL REVENUE		¢77.250.00	¢40,000,00	# 67.050.00
SERVICE	Describe the property that secures the claim:	\$77,259.00	\$10,000.00	\$67,259.00
Creditor's Name	RE - 2-4 Alvin Place			
Insolvency Section				
P.O. Box 7346 Philadelphia, PA	As of the date you file, the claim is: Check all the	at .		
19101-7346	apply. Contingent			
	<u> </u>			
Number, Street, City, State & Zip Code	Unliquidated			
Who owes the debt? Check one.	■ Disputed Nature of lien. Check all that apply.			
_	☐ An agreement you made (such as mortgage of	or cocured		
Debtor 1 only	car loan)	or secureu		
☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lie	n)		
☐ At least one of the debtors and another	☐ Statutory lief (such as tax lief), mechanic's lie ☐ Judgment lien from a lawsuit	11)		
or and addition and another				

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

page 1 of 3

Debtor 1 Robert C. Clark		Case number (if know)	2-18-20118	
First Name Middle N	ame Last Name			
☐ Check if this claim relates to a community debt	Other (including a right to offset) Federal tax	k lien		
Date debt was incurred 1/24/12	Last 4 digits of account number 9302			
MONROE COUNTY				
2.3 TREASURER	Describe the property that secures the claim:	\$8,534.00	\$150,000.00	\$0.00
Creditor's Name	RE - 2-4 Alvin Place			
39 West Main Street Room B-2				
Rochester, NY	As of the date you file, the claim is: Check all that apply.			
14614-1467	☐ Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated			
Who owes the debt? Check one.	☐ Disputed Nature of lien. Check all that apply.			
Debtor 1 only	☐ An agreement you made (such as mortgage or see	cured		
Debtor 2 only	car loan)			
☐ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset)	(
Date debt was incurred 2016 - 2018	Last 4 digits of account number 3174			
NVC DEDT TAY 9				
2.4 NYS DEPT. TAX & FINANCE	Describe the property that secures the claim:	\$12,290.00	\$6,145.00	\$6,145.00
Creditor's Name	RE - 2-4 Alvin Place			
Attn: BK Unit	As of the date you file, the claim is: Check all that			
P.O. Box 5300 Albany, NY 12205	apply.			
	Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated			
Who owes the debt? Check one.	■ Disputed Nature of lien. Check all that apply.			
_	☐ An agreement you made (such as mortgage or sec	cured		
■ Debtor 1 only □ Debtor 2 only	car loan)	ourcu		
Debtor 1 and Debtor 2 only	■ Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a	☐ Other (including a right to offset)			
community debt	— Cities (including a right to onset)			
Date debt was incurred 2008	Last 4 digits of account number 9302			
2.5 TOWER TAX II LLC	Describe the property that secures the claim:	\$21,706.39	\$150,000.00	\$0.00
Creditor's Name	RE - 2-4 Alvin Place	\$21,700.39	\$150,000.00	φυ.υυ
	RE - 2-4 AIVIII I lace			
P.O. Box 399	As of the data was file the alaim in a			
Morristown, NJ	As of the date you file, the claim is: Check all that apply.			
07963-0399	☐ Contingent			
Number, Street, City, State & Zip Code	Unliquidated			
Who owes the debt? Check one.	☐ Disputed Nature of lien. Check all that apply.			
Debtor 1 only	☐ An agreement you made (such as mortgage or sec	cured		
Debtor 2 only	car loan)			
☐ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit			

Official Form 106D

Additional Page of Schedule D: Creditors Who Have Claims Secured by Property

Debto	or 1 Robert C. C	lark			Ca	se number (if know)	2-18-20118	
	First Name	Middle Name	Last Name					
	eck if this claim rela	tes to a	Other (including a right to offset)	Co	unty tax			
Date o	debt was incurred	2012-2015	Last 4 digits of account nun	ber	3174			
	•		n A on this page. Write that nun		ere:	\$141,189		
Writ	e that number here:	•				\$141,189	.39	
			Debt That You Already Listed					
trying than c	to collect from you one creditor for any	for a debt you owe to	o someone else, list the creditor listed in Part 1, list the addition	in Pa	rt 1, and ther	list the collection age	or example, if a collection agency is ncy here. Similarly, if you have more ional persons to be notified for any	
	Name, Number, Stre	et, City, State & Zip C	ode		On which	ine in Part 1 did you ente	er the creditor? _2.2	
	130 South Elmo 2nd Floor Buffalo, NY 142				Last 4 digi	ts of account number	-	
	Name, Number, Stre	et, City, State & Zip C E LLP	ode		On which	ine in Part 1 did you ente	er the creditor? 2.5	
	Attn: Anthony of 1400 First Federal Rochester, NY	eral Plaza			Last 4 digi	ts of account number	-	

Fil	l in this inform	nation to identify your	case.					
	btor 1		Just:					
De	DIOI I	Robert C. Clark First Name	Middle Name	Last Na	me			
	btor 2 ouse if, filing)	First Name	Middle Name	Last Na	me			
Un	ited States Bar	nkruptcy Court for the:	WESTERN DIS	TRICT OF NEW YORK				
	se number 2	2-18-20118					□ Che	ck if this is an
Ľ							_	ended filing
∩f	ficial Form	106E/F						
$\overline{}$		/F: Creditors W	ho Have U	nsecured Clain	าร			12/15
Sch Sch left. nam	edule G: Executedule D: Creditor Attach the Content and case nun	racts or unexpired leases tory Contracts and Unexp ors Who Have Claims Sect tinuation Page to this pag nber (if known).	ired Leases (Offici ured by Property. I e. If you have no ir	al Form 106G). Do not inc f more space is needed, o	lude any cre opy the Par	ditors with partially styou need, fill it out,	secured claims that number the entrie	at are listed in s in the boxes on the
		rs have priority unsecure		ou?				
	☐ No. Go to Pa	art 2.						
	Yes.							
2.	identify what typ possible, list the Part 1. If more t	priority unsecured claims be of claim it is. If a claim ha e claims in alphabetical orde han one creditor holds a pa	s both priority and r or according to the c rticular claim, list the	nonpriority amounts, list that reditor's name. If you have se other creditors in Part 3.	t claim here a more than tw	and show both priority a	and nonpriority amo	ounts. As much as
	(For an explana	ation of each type of claim, s	ee the instructions f	or this form in the instruction	on booklet.)	Total claim	Priority amount	Nonpriority amount
2.1		PT. TAX & FINANCE	Last 4	I digits of account number	9302	\$1,994.00	\$1,453.0	\$541.00
	Attn: B	-	When	was the debt incurred?	2012, 2	013	_	
	P.O. Bo	NY 12205						
	Number St	reet City State Zlp Code	As of	the date you file, the clair	n is: Check a	all that apply		
	Who incurred	I the debt? Check one.	☐ Co	ontingent				
	Debtor 1 o	nly	☐ Un	liquidated				
	Debtor 2 o	nly	☐ Dis	sputed				
	Debtor 1 a	nd Debtor 2 only	Туре	of PRIORITY unsecured of	laim:			
	☐ At least on	e of the debtors and anothe	r Do	mestic support obligations				
	☐ Check if the	his claim is for a commur	nity debt Ta	xes and certain other debts	you owe the	government		
	Is the claim s	ubject to offset?	☐ Cla	aims for death or personal i	njury while yo	ou were intoxicated		
	No		☐ Ot	her. Specify				
	☐ Yes			Income to	ax			
Pa	rt 2: List Al	I of Your NONPRIORIT	Y Unsecured Cla	aims				
3.	Do any credito	rs have nonpriority unsec	ured claims again	st you?				
	No. You have	ve nothing to report in this page	art. Submit this form	to the court with your othe	r schedules.			
	☐ Yes.	re meaning to repeat in time p	a	. to the ocurt man your onle				
_								
		thers to Be Notified Ab						
is h	s trying to collect	ly if you have others to be ct from you for a debt you one creditor for any of the lebts in Parts 1 or 2, do no	owe to someone edebts that you list	else, list the original credi led in Parts 1 or 2, list the	tor in Parts	l or 2, then list the co	llection agency h	ere. Similarly, if you

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

Total Claim

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

Page 1 of 2

Debtor 1 Rol	bert C.	Clark	Case r	number (if know)	2-18-20118
	6a.	Domestic support obligations	6a.	\$	0.00
Total claims					
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	1,994.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	1,994.00
				Total	Claim
	6f.	Student loans	6f.	\$	0.00
Total claims					
rom Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	0.00
		Total Nonpriority. Add lines 6f through 6i.	6j.	\$	0.00

Fill in this inform	mation to identify your	case:			
Debtor 1	Robert C. Clark				
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bankruptcy Court for the:		WESTERN DISTRICT O	OF NEW YORK		
Case number	2-18-20118				
(if known)	2 10 20110				Check if this is an amended filing
					amended illing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with Name, Number	whom you have the , Street, City, State and ZIP (contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			
	City		State	ZIP Code	<u> </u>
2.2	City		Otate	Zii Code	
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.3	-				_
	Name				
	Number	Street			
	City		State	ZIP Code	_
2.4	City		State	ZIF Code	
	Name				_
	Number	Street			_
		0001			
	City		State	ZIP Code	
2.5	-				_
	Name				
	Number	Street			
	City		State	ZIP Code	_
	Oity		State	ZIF Code	

Fill in this	information to identify your	case:			
Debtor 1	Robert C. Clark				
D 1 / 0	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, fili	ing) First Name	Middle Name	Last Name		
United Sta	ates Bankruptcy Court for the:	WESTERN DISTRICT	OF NEW YORK		
Case num	2-18-20118			☐ Check if this is an amended filing	
Officia	l Form 106H				
Sched	dule H: Your Cod	ebtors		12/1	5
1. Do No Yes 2. With Arizor No Yes 3. In Co in line	shin the last 8 years, have young, California, Idaho, Louisiana . Go to line 3. s. Did your spouse, former spoulumn 1, list all of your codebte 2 again as a codebtor only is	you are filing a joint case, I lived in a community pour, Nevada, New Mexico, Pourse, or legal equivalent livers. Do not include your of that person is a guarar	roperty state or territory uerto Rico, Texas, Washine with you at the time?	y? (Community property states and territories include	cial
out C	olumn 1: Your codebtor	Tomi Toolin j, or oched	idie o (omeiai i omi io	Column 2: The creditor to whom you owe the del	
	Name, Number, Street, City, State and Z	P Code		Check all schedules that apply:	,ι
3.1	Name			☐ Schedule D, line ☐ Schedule E/F, line ☐ Schedule G, line	
	Number Street City	State	ZIP Code		
3.2	Name			□ Schedule D, line □ Schedule E/F, line □ Schedule G, line	
-	Number Street City	State	ZIP Code	_	

							Ī				
	in this information btor 1	to identify your ca									
	btor 2 buse, if filing)					- -					
` '		otcv Court for the	: WESTERN DISTRICT	Γ OF NEW YORK							
		18-20118				_	Chec	k if this is			
	nown)	10-20110		-				n amend			
										ing postpetition following date:	
0	fficial Form	<u> 1061</u>					Ī	/M / DD/ `	YYYY		
S	chedule I:	Your Inc	ome								12/15
spo	use. If you are sep ch a separate she	parated and you	are married and not filir r spouse is not filing w On the top of any additi	ith you, do not incl	ude inforr	natio	on abou	t your sp	ouse. If n	nore space is	needed,
1.	Fill in your emplinformation.	loyment		Debtor 1				Debtor	2 or non-	filing spouse	
	If you have more attach a separate	•	Employment status	■ Employed				☐ Emp	•		
	information abou employers.	1 0	, ,	☐ Not employed	☐ Not employed			□ Not €	employed		
	. ,		Occupation	Maintenance							
	Include part-time self-employed wo		Employer's name	CITY OF ROCH	HESTER						
	Occupation may or homemaker, if		Employer's address	30 Church Stre Rochester, NY							
			How long employed t	here? <u>1 yr.</u>				_			
Esti spou	mate monthly incurse unless you are	separated.	ate you file this form. If	, 3	·		,		•	•	· ·
,	e space, attach a s	, ,	ore than one employer, contains form.	ombine the informati	on for all e	emplo		·			you need
							For De	DIOI 1		ebtor 2 or iling spouse	
2.			ry, and commissions (becalculate what the monthle		2.	\$	1	,766.00	\$	N/A	
3.	Estimate and lis	st monthly overt	ime pay.		3.	+\$		0.00	+\$	N/A	
4.	Calculate gross	Income. Add lin	ne 2 + line 3.		4.	\$	1,7	66.00	\$_	N/A	

Debi	or 1	Robert C. Clark	_	Cas	e number (# known)	2-18-201	18	
				F	or Debtor 1	For Debt	or 2 or g spouse	
	Сору	y line 4 here	4.	\$	1,766.00	\$	N/A	
5.	l ist :	all payroll deductions:		•				
J.		Tax, Medicare, and Social Security deductions	F.o.	\$	205.00	¢	NI/A	
	5a. 5b.	Mandatory contributions for retirement plans	5a. 5b.	٠.	305.00 0.00	\$ \$	N/A N/A	
	5c.	Voluntary contributions for retirement plans	5c.		0.00	\$	N/A	
	5d.	Required repayments of retirement fund loans	5d.		0.00	\$	N/A	
	5e.	Insurance	5e.		0.00	\$	N/A	
	5f.	Domestic support obligations	5f.	\$	0.00	\$	N/A	
	5g.	Union dues	5g.	\$	0.00	\$	N/A	
	5h.	Other deductions. Specify:	5h.	+ \$	0.00	+ \$	N/A	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	305.00	\$	N/A	
7.	Calc	ulate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	1,461.00	\$	N/A	
8.	List a 8a.	All other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total						
		monthly net income.	8a.	\$	900.00	\$	N/A	
	8b.	Interest and dividends	8b.	\$	0.00	\$	N/A	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	t 8c.	\$	0.00	\$	N/A	
	8d.	Unemployment compensation	8d.		0.00	\$	N/A	
	8e.	Social Security	8e.		1,101.00	\$	N/A	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	e 8f.	\$	0.00	\$	N/A	
	8g.	Pension or retirement income	— 8g.	٠.	0.00	\$	N/A	
	8h.	Other monthly income. Specify:	8h.	٠.	0.00	·	N/A	
			_		1	<u> </u>		
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$_	2,001.00	\$	N/A	
10.		ulate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$	3,462.00 + \$	N/	A = \$ 3,462	00
11.	Include other	e all other regular contributions to the expenses that you list in <i>Schedule</i> de contributions from an unmarried partner, members of your household, your friends or relatives.	depei				tulo I	
	Spec	ot include any amounts already included in lines 2-10 or amounts that are not ify:	avalla	bie ic	pay expenses iis			00
12.		the amount in the last column of line 10 to the amount in line 11. The reset that amount on the Summary of Schedules and Statistical Summary of Certales					2. \$ 3,462	00
							Combined monthly incom	e
13.	Do y	ou expect an increase or decrease within the year after you file this form No.	1?					

Yes. Explain:

Fill in	n this informa	ation to identify y	our case:					
Debto		Robert C. Cl				Check	c if this is:	
		NOBOLL OF O	un				An amended filing	
Debto (Spor	or 2 use, if filing)							ving postpetition chapter the following date:
` '	. 0,	runtey Court for the	· WESTE	ERN DISTRICT OF NEW Y	ORK.	_	MM / DD / YYYY	
			. WESTE	IN DISTRICT OF NEW T	OKK		WIIWI / DD / TTTT	
(If kn		-18-20118						
Of	ficial Fo	orm 106J						
		J: Your						12/15
info	rmation. If n		eded, atta	. If two married people ar ich another sheet to this i n.				
Part		ribe Your House	ehold					
1.	Is this a joi							
	■ No. Go to	o line 2. es Debtor 2 live	in a senar	ate household?				
			и оори.					
			st file Offici	al Form 106J-2, <i>Expenses</i>	for Separate House	ehold of Debto	or 2.	
2.	Do you hav	e dependents?	■ No					
	Do not list D Debtor 2.	ebtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relati Debtor 1 or Debtor		Dependent's age	Does dependent live with you?
	Do not state							□ No
	dependents	names.						☐ Yes ☐ No
								☐ Yes
								□ No
								Yes
								□ No
3.	Do your ex	penses include	_					☐ Yes
0.	expenses of	of people other t	han $_{\square}$	No Yes				
	yourself an	d your depende	ents?	res				
		nate Your Ongoi						
expe		a date after the		uptcy filing date unless y y is filed. If this is a supp				
Inclu	ude expense	es paid for with	non-cash	government assistance it	f you know			
	icial Form 1		a nave inc	riuded it on Scriedule I: 1	our income		Your expe	enses
4.		or home owners nd any rent for th		uses for your residence. In or lot.	nclude first mortgage	e 4. \$		0.00
	If not include	ded in line 4:						
	4a. Real	estate taxes				4a. \$		503.00
	•	erty, homeowner'				4b. \$		80.00
		e maintenance, re eowner's associa		upkeep expenses		4c. \$ 4d. \$		100.00 0.00
5.				our residence, such as ho	me equity loans	5. \$		0.00

Official Form 106J Schedule J: Your Expenses page 1

Deb	tor 1 Robert C. Clark	Case number (i	f known)	2-18-20118
6.	Utilities:			
٥.	6a. Electricity, heat, natural gas	6a. \$		170.00
	6b. Water, sewer, garbage collection	6b. \$		45.00
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c. \$		100.00
	6d. Other. Specify:	6d. \$		0.00
7.	Food and housekeeping supplies	7. \$		280.00
8.	Childcare and children's education costs	8. \$		0.00
9.	Clothing, laundry, and dry cleaning	9. \$		50.00
10.	Personal care products and services	10. \$		20.00
11.	Medical and dental expenses	11. \$		30.00
12.	Transportation. Include gas, maintenance, bus or train fare.	10 0		25.00
4.0	Do not include car payments.	12. \$		
	Entertainment, clubs, recreation, newspapers, magazines, and books	13. \$		90.00
	Charitable contributions and religious donations	14. \$		0.00
15.	Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.			
	15a. Life insurance	15a. \$		0.00
	15b. Health insurance	15b. \$		0.00
	15c. Vehicle insurance	15c. \$		0.00
	15d. Other insurance. Specify:	15d. \$		0.00
16.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.	ισα. ψ		0.00
	Specify:	16. \$		0.00
17.	Installment or lease payments:	 -		
	17a. Car payments for Vehicle 1	17a. \$		0.00
	17b. Car payments for Vehicle 2	17b. \$		0.00
	17c. Other. Specify:	17c. \$		0.00
	17d. Other. Specify:	17d. \$		0.00
18.	Your payments of alimony, maintenance, and support that you did not report as	18. \$		0.00
10	deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). Other payments you make to support others who do not live with you.	\$ -		0.00
15.	Specify:	19.		0.00
20	Other real property expenses not included in lines 4 or 5 of this form or on Sche		ncome	
_0.	20a. Mortgages on other property	20a. \$		0.00
	20b. Real estate taxes	20b. \$		0.00
	20c. Property, homeowner's, or renter's insurance	20c. \$		0.00
	20d. Maintenance, repair, and upkeep expenses	20d. \$		0.00
	20e. Homeowner's association or condominium dues	20e. \$		0.00
21.	Other: Specify: Misc. household expense	21. +\$		100.00
22.				4 500 00
	22a. Add lines 4 through 21.22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	\$		1,593.00
		\$		
	22c. Add line 22a and 22b. The result is your monthly expenses.	\$		1,593.00
23.	Calculate your monthly net income.			
	23a. Copy line 12 (your combined monthly income) from Schedule I.	23a. \$		3,462.00
	23b. Copy your monthly expenses from line 22c above.	23b\$		1,593.00
	23c. Subtract your monthly expenses from your monthly income.	23c. \$		1,869.00
	The result is your monthly net income.	236. Ψ		1,000.00
24.	Do you expect an increase or decrease in your expenses within the year after your for example, do you expect to finish paying for your car loan within the year or do you expect your modification to the terms of your mortgage? No.			ase or decrease because of a
	Yes. Explain here:			

Fill in this infor	mation to identify your	case:		
Debtor 1	Robert C. Clark			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	WESTERN DISTRICT (OF NEW YORK	
Case number (if known)	2-18-20118			☐ Check if this is an amended filing
Official Form		ın Individual	Debtor's Schedules	12/15
·			ensible for supplying correct information.	toward associate management
obtaining mone		n connection with a banl	s or amended schedules. Making a false sta kruptcy case can result in fines up to \$250,0	

Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?

No

Yes. Name of person

Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

X /s/ Robert C. Clark
Robert C. Clark
Signature of Debtor 1

Date February 15, 2018

Date

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

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Best Case Bankruptcy

Filli	in this info	rmation to identify you	r case:			
Deb	tor 1	Robert C. Clark				
		First Name	Middle Name	Last Name		
	tor 2 use if, filing)	First Name	Middle Name	Last Name		
Unit	ed States F	Bankruptcy Court for the:	WESTERN DISTRICT OF	- NEW YORK		
		Januario, Court of the				
(if kno	e number	2-18-20118				Check if this is an
	,				_	amended filing
Off	icial F	orm 107				
			Affairs for Individ	duals Filing for B	ankruntcy	4/16
			ible. If two married people a attach a separate sheet to			
numl	ber (if kno	wn). Answer every que	stion.			
Part	1: Give	e Details About Your Ma	arital Status and Where You	Lived Before		
1.	What is yo	our current marital statu	ıs?			
	□ Morris	- d				
	☐ Marrie	eu narried				
2.	During the	e last 3 years, have you	lived anywhere other than	where you live now?		
	No					
	☐ Yes. l	ist all of the places you l	ived in the last 3 years. Do no	ot include where you live now	<i>1</i> .	
	Debtor 1	Prior Address:	Dates Debtor 1	Debtor 2 Prior Ac	Idress:	Dates Debtor 2
			lived there			lived there
			ver live with a spouse or leg			
state	s and territ	<i>ories</i> include Arizona, Ca	ılifornia, Idaho, Louisiana, Ne	vada, New Mexico, Puerto R	ico, Texas, Washington and N	Visconsin.)
	No					
	☐ Yes. I	Make sure you fill out Scl	hedule H: Your Codebtors (Of	fficial Form 106H).		
Part	2 Exp	lain the Sources of You	r Income			
	•					
			mployment or from operating traceived from all jobs and a			endar years?
			have income that you receive			
	□ No					
		Fill in the details.				
			Deliterat		Dalifari O	
			Debtor 1 Sources of income	Gross income	Debtor 2 Sources of income	Gross income
			Check all that apply.	(before deductions and	Check all that apply.	(before deductions
				exclusions)		and exclusions)
		1 of current year until iled for bankruptcy:	☐ Wages, commissions,	\$1,000.00	☐ Wages, commissions,	
ше	uate you fi	neu ioi bankruptcy:	bonuses, tips		bonuses, tips	
			Operating a business		Operating a business	

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

	Debtor 1		Debtor 2	
	Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deduction and exclusions)
For last calendar year: (January 1 to December 31, 2017)	☐ Wages, commissions, bonuses, tips \$6,000.00		☐ Wages, commissions, bonuses, tips	
	Operating a business		☐ Operating a business	
	■ Wages, commissions, bonuses, tips	\$17,512.00	☐ Wages, commissions, bonuses, tips	
	☐ Operating a business		☐ Operating a business	
For the calendar year before that: (January 1 to December 31, 2016)	☐ Wages, commissions, bonuses, tips	\$6,000.00	☐ Wages, commissions, bonuses, tips	
	Operating a business		☐ Operating a business	

Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1.

List each source and the gross income from each source separately. Do not include income that you listed in line 4.

Yes. Fill in the details.

	Debtor 1		Debtor 2	
	Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income (before deductions and exclusions)
From January 1 of current year until the date you filed for bankruptcy:	Social Security Income	\$2,422.00		
For last calendar year: (January 1 to December 31, 2017)	Social Security Income (approx.)	\$14,532.00		
	Gross Rental Income	\$7,000.00		
For the calendar year before that: (January 1 to December 31, 2016)	Rental income	\$8,000.00		
	Social Security Income	\$14,470.00		
	Gross Rental Income	\$7,000.00		

List Certain Payments You Made Before You Filed for Bankruptcy

6	Are either	Debtor 1's	or Debtor 2	2's debts	primarily of	consumer	debts?

Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more?

□ No. Go to line 7.

☐ Yes List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

Statement of Financial Affairs for Individuals Filing for Bankruptcy Official Form 107

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De	ebtor 1 Robert C. Clark			Cas	se number (if known)	2-18-2011	8
	* Subject to adjustr	ment on 4/01/19	and every 3 years after th	at for cases filed or	or after the date o	f adjustment.	
			e primarily consumer del for bankruptcy, did you pa		al of \$600 or more?		
	■ No. Go to li	ne 7.					
	include		or to whom you paid a total lomestic support obligation uptcy case.				
	Creditor's Name and Addres	ss	Dates of payment	Total amount paid	Amount you still owe	Was this pa	ayment for
7.	Within 1 year before you filed Insiders include your relatives; of which you are an officer, dire a business you operate as a so alimony.	any general pa ctor, person in	rtners; relatives of any gen- control, or owner of 20% of	eral partners; partners r more of their votin	erships of which yo g securities; and ar	u are a gener ny managing a	al partner; corporations agent, including one for
	☐ Yes. List all payments to a	ın insider.					
	Insider's Name and Address		Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment
8.	Within 1 year before you filed insider? Include payments on debts gua No Yes. List all payments to a Insider's Name and Address	ranteed or cosi in insider	,, ,	ments or transfer a Total amount paid	Amount you still owe	Reason for	ebt that benefited an this payment ditor's name
Pa	rt 4: Identify Legal Actions,	Repossession	s, and Foreclosures				
9.	Within 1 year before you filed List all such matters, including modifications, and contract disp No Yes. Fill in the details.	I for bankrupto personal injury	y, were you a party in an				
	Case title Case number		Nature of the case	Court or agency		Status of the	ne case
	Tower Tax II LLC vs. Robert C. Clark, et al 2016-3991		Foreclosure action	Supreme Cour State of New Y County of Mor	ork	■ Pending □ On appo □ Conclud	eal
10.	Within 1 year before you filed Check all that apply and fill in the			erty repossessed, t	oreclosed, garnis	shed, attache	d, seized, or levied?
	Yes. Fill in the information	below.					
	Creditor Name and Address		Describe the Property		Date		Value of the property
			Explain what happened	l			property

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Statement of Financial Affairs for Individuals Filing for Bankruptcy

11.			did any creditor, including a bank or financial ins	stitution, set off any a	amounts from your
	accounts or refuse to make a payment bed No	cause	e you owed a debt?		
	Yes. Fill in the details.	De	conibe the action the avaditor tools	Data action was	Amaunt
	Creditor Name and Address	De	escribe the action the creditor took	Date action was taken	Amount
12.	Within 1 year before you filed for bankrup court-appointed receiver, a custodian, or a		ras any of your property in the possession of an a er official?	ssignee for the bend	efit of creditors, a
	■ No □ Yes				
Par	t 5: List Certain Gifts and Contributions				
13.	Within 2 years before you filed for bankru ■ No	ptcy,	did you give any gifts with a total value of more th	nan \$600 per person	?
	Yes. Fill in the details for each gift.				
	Gifts with a total value of more than \$600 per person		Describe the gifts	Dates you gave the gifts	Value
	Person to Whom You Gave the Gift and Address:				
14.	No No		did you give any gifts or contributions with a tota	I value of more than	\$600 to any charity?
	Yes. Fill in the details for each gift or con			_	
	Gifts or contributions to charities that to more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)	tal	Describe what you contributed	Dates you contributed	Value
Par	t 6: List Certain Losses				
		tcy or	since you filed for bankruptcy, did you lose anyt	hing because of the	t, fire, other disaster,
	-				
	■ No □ Yes. Fill in the details.				
		Descr	ibe any insurance coverage for the loss	Date of your	Value of property
	how the loss occurred	nclud	e the amount that insurance has paid. List pending nce claims on line 33 of Schedule A/B: Property.	loss	lost
Par	t 7: List Certain Payments or Transfers				
16.	consulted about seeking bankruptcy or pr	epari	id you or anyone else acting on your behalf pay on ga bankruptcy petition? rs, or credit counseling agencies for services required		rty to anyone you
	□ No				
	Yes. Fill in the details.				
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not Yo	u	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
	TREVETT CRISTO SALZER & ANDOLINA P.C. Two State Street, Suite 1000 Rochester, NY 14614 dealy@trevettcristo.com		Attorney Fees	11/2/16	\$2,036.98
	•				

Case number (if known) 2-18-20118

Official Form 107

Debtor 1 Robert C. Clark

17.	Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16.							
	■ No Yes Fill in the details							
		December 1 and 1		4	D-1	A		
	Person Who Was Paid Address	Description and va transferred	alue of any prop	berty	Date payment or transfer was made	Amount of payment		
18.	Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.							
	☐ Yes. Fill in the details.							
	Person Who Received Transfer Address	any property or s received or debts schange	Date transfer was made					
	Person's relationship to you							
19.	Within 10 years before you filed for bankruptcy beneficiary? (These are often called asset-protect No ☐ Yes. Fill in the details.		property to a s	self-settled tr	ust or similar device o	of which you are a		
	Name of trust	Description and va	Description and value of the property transfer			Date Transfer was		
	Name of trust	made						
Part 8: List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, b houses, pension funds, cooperatives, associations, and other financial institutions. No								
	Yes. Fill in the details.	not 4 digito of	Tyme of coopy	nt au De	ota aaaaunt waa	l oot bolonge		
		count number instrument c		clo	ate account was osed, sold, oved, or ansferred	Last balance before closing or transfer		
21.	Do you now have, or did you have within 1 year cash, or other valuables? No Yes. Fill in the details.	r before you filed for	bankruptcy, an	y safe deposi	it box or other deposi	tory for securities,		
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acce Address (Number, State and ZIP Code)		Describe the	contents	Do you still have it?		
22.	Have you stored property in a storage unit or p No Yes. Fill in the details.	•	home within 1 y	year before y	ou filed for bankruptc	y?		
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or he to it? Address (Number, State and ZIP Code)		Describe the	contents	Do you still have it?		

Official Form 107

Debtor 1 Robert C. Clark Case number (if known) 2-18-20118

Par	rt 9: Identify Property You Hold or Control for S	omeone Else							
23.	Do you hold or control any property that someon for someone.	e else owns? Include any proper	rty yo	ou borrowed from, are storing for	, or hold in trust				
	■ No □ Yes. Fill in the details.								
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Des	scribe the property	Value				
Par	rt 10: Give Details About Environmental Informat	ion							
For	the purpose of Part 10, the following definitions a	pply:							
	Environmental law means any federal, state, or lotoxic substances, wastes, or material into the air regulations controlling the cleanup of these substances.	, land, soil, surface water, ground	_	•					
	Site means any location, facility, or property as d to own, operate, or utilize it, including disposal s	-	law,	whether you now own, operate, o	or utilize it or used				
	Hazardous material means anything an environm hazardous material, pollutant, contaminant, or si	nental law defines as a hazardous	s was	ste, hazardous substance, toxic s	ubstance,				
Rep	port all notices, releases, and proceedings that you	ı know about, regardless of wher	n the	y occurred.					
24.	Has any governmental unit notified you that you	may be liable or potentially liable	und	ler or in violation of an environme	ental law?				
	■ No □ Yes. Fill in the details.								
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	d	Environmental law, if you know it	Date of notice				
25.	Have you notified any governmental unit of any r	Have you notified any governmental unit of any release of hazardous material?							
	■ No □ Yes. Fill in the details.								
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	d	Environmental law, if you know it	Date of notice				
26.	Have you been a party in any judicial or administ	rative proceeding under any envi	ironn	nental law? Include settlements a	and orders.				
	■ No □ Yes. Fill in the details.								
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nat	ture of the case	Status of the case				
Par	rt 11: Give Details About Your Business or Conn	ections to Any Business							
27.	Within 4 years before you filed for bankruptcy, di	d you own a business or have ar	ny of	the following connections to any	business?				
	☐ A sole proprietor or self-employed in a tra	ade, profession, or other activity,	, eith	er full-time or part-time					
	☐ A member of a limited liability company (LLC) or limited liability partnersh	ip (L	LP)					
	☐ A partner in a partnership								
	☐ An officer, director, or managing executive	ve of a corporation							
	☐ An owner of at least 5% of the voting or e	equity securities of a corporation							

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

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	No New of the character well as Octob	2 40	
	No. None of the above applies. Go to F	art 12.	
	Yes. Check all that apply above and fill	in the details below for each business.	
_	Business Name	Describe the nature of the business	Employer Identification number
	Address Number, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	Do not include Social Security number or ITIN.
Ì	, , , . , , ,	Name of accountant of bookkeeper	Dates business existed
	stitutions, creditors, or other parties.	cy, did you give a financial statement to an	nyone about your business? Include all financial
_	Name	Date Issued	
1	Address Number, Street, City, State and ZIP Code)	Date issueu	
Dort	2: Sign Below		
are tru	ie and correct. I understand that making a		declare under penalty of perjury that the answers btaining money or property by fraud in connection irs, or both.
/s/ R	obert C. Clark		
Robe	ert C. Clark ature of Debtor 1	Signature of Debtor 2	
Date	February 15, 2018	Date	
Did you ■ No □ Yes		ent of Financial Affairs for Individuals Filing	g for Bankruptcy (Official Form 107)?
Did yo	ou pay or agree to pay someone who is not	t an attorney to help you fill out bankruptcy	r forms?
■ No			
☐ Yes	s. Name of Person Attach the Bankru	ptcy Petition Preparer's Notice, Declaration, a	nd Signature (Official Form 119).

Case number (if known) 2-18-20118

Debtor 1 Robert C. Clark

United States Bankruptcy Court Western District of New York

In re	Robert C. Clark	Debtor(s)		se No. apter	2-18-20118 13	
	DISCLOSURE OF COMPI	ENSATION OF ATTOR	NEY FO	R DE	BTOR(S)	
CO	rsuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 201 mpensation paid to me within one year before the fil rendered on behalf of the debtor(s) in contemplation	ing of the petition in bankruptcy,	or agreed to l	be paid t	o me, for services rea	ndered or to
	For legal services, I have agreed to accept		\$ 	minii inclus	290.00/Hour. Estimated & mum \$3,600 Live of costs & filing fees	
	Prior to the filing of this statement I have received	<u>d</u>	\$		2,036.98	
	Balance Due		\$		1,563.02	
2. \$_	310.00 of the filing fee has been pai					
3. Th	e source of the compensation paid to me was:					
	✓ Debtor					
4. Th	e source of compensation to be paid to me is:					
	☐ Debtor ✓ Other (specify): Chap	oter 13 Plan Administrative E	xpense.			
5. v	I have not agreed to share the above-disclosed com	npensation with any other person t	unless they ar	e memb	ers and associates of	my law firm.
	I have agreed to share the above-disclosed compen- copy of the agreement, together with a list of the n					w firm. A
5. In	return for the above-disclosed fee, I have agreed to	render legal service for all aspects	s of the bankr	uptcy ca	ase, including:	
b. c.	Analysis of the debtor's financial situation, and rene Preparation and filing of any petition, schedules, sta Representation of the debtor at the meeting of credit [Other provisions as needed] Negotiations with secured creditors to reaffirmation agreements and applications of the secured creditors on head of the secured creditors are secured creditors.	atement of affairs and plan which itors and confirmation hearing, and reduce to market value; exe ions as needed; preparation	may be requid any adjourn	ired; ned hear nning;	ings thereof; preparation and fi	iling of
7. By	agreement with the debtor(s), the above-disclosed f Representation of the debtors in any d any other adversary proceeding.			oidance	es, relief from stay	actions or
		CERTIFICATION				
	ertify that the foregoing is a complete statement of a kruptcy proceeding.	any agreement or arrangement for	payment to n	ne for re	presentation of the de	ebtor(s) in
	oruary 15, 2018	/s/ David H. Ealy				
Dat	e	David H. Ealy, Eso Signature of Attorney		NY		
		TREVETT CRISTO	-			
		Two State Street, Rochester, NY 140				
		(585) 454-2181 Fa		4-4026		
		dealy@trevettcris				